

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)**USE FEC MAILING LABEL  
OR TYPE OR PRINT**Example: If typing, type  
over the lines

The New Republican Majority Fund

ADDRESS (number and street)

201 North Union Street

Suite 530

☐Check if different  
than previously  
reported. (ACC)

Alexandria

VA

22314

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00219220

3. IS THIS  
REPORT☒NEW  
(N)

OR

☐AMENDED  
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15  
Quarterly Report(Q1)☐July 15  
Quarterly Report(Q2)☒October 15  
Quarterly Report(Q3)☐January 31  
Quarterly Report(YE)☐July 31 Mid-Year  
Report(Non-election  
Year Only) (MY)☐Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)  
(Non-Election  
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)  
(Non-Election  
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)(c) 12-Day  
**PRE**-Election  
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the  
State of(d) 30-Day  
**Post**-Election  
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the  
State of

5. Covering Period

07

01

2008

through

09

30

2008

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Mr. Bret K., Boyles

Signature of Treasurer

Electronically Filed by Mr. Bret K., Boyles

Date

10

15

2008

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office  
Use  
Only**FEC FORM 3X**  
(Rev. 12/2004)

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name  
The New Republican Majority Fund

Report Covering the Period: From: 

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1		1235806.90
(b) Cash on Hand at Beginning of Reporting Period .....	1036581.81	
(c) Total Receipts (from Line 19) .....	4714.05	23698.95
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	1041295.86	1259505.85
7. Total Disbursements (from Line 31) .....	38093.39	256303.38
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	1003202.47	1003202.47
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

☒ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE OF RECEIPTS**

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

The New Republican Majority Fund

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	7	0	1	2	0	0	8

To:

M	M	D	D	Y	Y	Y	Y
0	9	3	0	2	0	0	8

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	0.00	800.00
(i) Itemized (use Schedule A) .....	0.00	400.00
(ii) Unitemized .....	0.00	1200.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) ..... ➡	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) ..... ➡	0.00	1200.00
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	3043.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	4714.05	19455.95
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	4714.05	23698.95
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	4714.05	23698.95

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	17593.39	138374.38
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡	17593.39	138374.38
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	17500.00	81000.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	10779.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	1000.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	11779.00
29. Other Disbursements.....	3000.00	25150.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	38093.39	256303.38
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	38093.39	256303.38

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	0.00	1200.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	11779.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	0.00	-10579.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	17593.39	138374.38
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	3043.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	17593.39	135331.38

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 6 / 14

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

The New Republican Majority Fund

**A.**

Full Name (Last, First, Middle Initial)

Hancock Bank

Mailing Address P.O. Box 4819

City

Gulfport

State

MS

Zip Code

39502

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

14910.74

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 3 1 / 2 0 0 8

Transaction ID: 28736119

Amount of Each Receipt this Period

168.84

Interest Income

**B.**

Full Name (Last, First, Middle Initial)

Hancock Bank

Mailing Address P.O. Box 4819

City

Gulfport

State

MS

Zip Code

39502

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15065.11

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 2 9 / 2 0 0 8

Transaction ID: 28736240

Amount of Each Receipt this Period

154.37

Interest Income

**C.**

Full Name (Last, First, Middle Initial)

Hancock Bank

Mailing Address P.O. Box 4819

City

Gulfport

State

MS

Zip Code

39502

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

17911.90

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 0 4 / 2 0 0 8

Transaction ID: 28736517

Amount of Each Receipt this Period

2846.79

Interest Income

**SUBTOTAL** of Receipts This Page (optional) .....

3170.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 7 / 14

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

The New Republican Majority Fund

**A.**

Full Name (Last, First, Middle Initial)

Hancock Bank

Mailing Address P.O. Box 4819

City

Gulfport

State

MS

Zip Code

39502

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

19315.44

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 2 1 / 2 0 0 8

Transaction ID: 28736601

Amount of Each Receipt this Period

1403.54

Interest Income

**B.**

Full Name (Last, First, Middle Initial)

Hancock Bank

Mailing Address P.O. Box 4819

City

Gulfport

State

MS

Zip Code

39502

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

19455.95

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 3 0 / 2 0 0 8

Transaction ID: 28736706

Amount of Each Receipt this Period

140.51

Interest Income

**SUBTOTAL** of Receipts This Page (optional) .....

1544.05

**TOTAL** This Period (last page this line number only) .....

4714.05

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 8 / 14

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

The New Republican Majority Fund

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Paychex</p> <p>Mailing Address 3060 Williams Drive #300</p> <p>City Fairfax State VA Zip Code 22031</p> <p>Purpose of Disbursement Payroll Service Expense</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 28736729</p> <p>Date of Disbursement  <div> <div>M M</div> <div>D D</div> <div>Y Y Y Y</div> </div> <div> <div>0 7</div> <div>1 0</div> <div>2 0 0 8</div> </div> </p> <p>Amount of Each Disbursement this Period  <div> <div></div> <div>39.00</div> </div> </p> <p>Payroll Service Expense</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Paychex</p> <p>Mailing Address 3060 Williams Drive #300</p> <p>City Fairfax State VA Zip Code 22031</p> <p>Purpose of Disbursement Payroll Service Expense</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 28736731</p> <p>Date of Disbursement  <div> <div>M M</div> <div>D D</div> <div>Y Y Y Y</div> </div> <div> <div>0 8</div> <div>1 1</div> <div>2 0 0 8</div> </div> </p> <p>Amount of Each Disbursement this Period  <div> <div></div> <div>47.50</div> </div> </p> <p>Payroll Service Expense</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Paychex</p> <p>Mailing Address 3060 Williams Drive #300</p> <p>City Fairfax State VA Zip Code 22031</p> <p>Purpose of Disbursement Payroll Service Expense</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 28736738</p> <p>Date of Disbursement  <div> <div>M M</div> <div>D D</div> <div>Y Y Y Y</div> </div> <div> <div>0 9</div> <div>1 0</div> <div>2 0 0 8</div> </div> </p> <p>Amount of Each Disbursement this Period  <div> <div></div> <div>39.00</div> </div> </p> <p>Payroll Service Expense</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

**125.50**

**TOTAL** This Period (last page this line number only) ..... ►



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 9 / 14

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

The New Republican Majority Fund

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Campaign Finance Solutions</p> <p>Mailing Address 201 North Union Street Suite 530</p> <p>City Alexandria State VA Zip Code 22314</p> <p>Purpose of Disbursement Administrative Consulting Expense</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 28736748 <b>Date of Disbursement</b>  <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 1 9 / 2 0 0 8</div> </div> </p> <p>Amount of Each Disbursement this Period  <div>10000.00</div> </p> <p>Administrative Consulting Expense</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Chip Reynolds</p> <p>Mailing Address 1701 Midway Road</p> <p>City Clinton State MS Zip Code 39056</p> <p>Purpose of Disbursement Strategic Consulting</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 28756739 <b>Date of Disbursement</b>  <div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 1 1 / 2 0 0 8</div> </div> </p> <p>Amount of Each Disbursement this Period  <div>1000.00</div> </p> <p>Strategic Consulting</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Campaign Finance Solutions</p> <p>Mailing Address 201 North Union Street Suite 530</p> <p>City Alexandria State VA Zip Code 22314</p> <p>Purpose of Disbursement Administrative Consulting Expense</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 28756855 <b>Date of Disbursement</b>  <div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 1 1 / 2 0 0 8</div> </div> </p> <p>Amount of Each Disbursement this Period  <div>5000.00</div> </p> <p>Administrative Consulting Expense</p>

**SUBTOTAL** of Disbursements This Page (optional) .....

16000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 10 / 14

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

The New Republican Majority Fund

A.

Full Name (Last, First, Middle Initial)

Patton Boggs, LLP

Mailing Address 2550 M Street, NW

City  
Washington

State  
DC

Zip Code  
20037

Purpose of Disbursement  
Professional Services - Legal

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State:

District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 28756887

Date of Disbursement

09 / 11 / 2008

Amount of Each Disbursement this Period

1425.00

Professional Services -  
Legal

SUBTOTAL of Disbursements This Page (optional) .....

1425.00

TOTAL This Period (last page this line number only) .....

17550.50

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
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PAGE 11 / 14

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

The New Republican Majority Fund

**A.**

Full Name (Last, First, Middle Initial)

Moran For Kansas

Mailing Address P.O. Box 1151

City  
Hays

State  
KS

Zip Code  
67601

Purpose of Disbursement  
2008 General

Candidate Name  
Rep. Jerry Moran

011  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: KS District: 01

Transaction ID: 28736740

Date of Disbursement

07 / 16 / 2008

Amount of Each Disbursement this Period

5000.00

2008 General

**B.**

Full Name (Last, First, Middle Initial)

Republican Majority Fund

Mailing Address P.O. Box 144

City  
Alexandria

State  
VA

Zip Code  
22313

Purpose of Disbursement  
2008 Contribution

Candidate Name  
Republican Majority Fund

011  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 28736750

Date of Disbursement

09 / 11 / 2008

Amount of Each Disbursement this Period

1000.00

2008 Contribution

**C.**

Full Name (Last, First, Middle Initial)

McCain Victory 2008

Mailing Address 1235 South Clark Street  
Suite M

City  
Arlington

State  
VA

Zip Code  
22202

Purpose of Disbursement  
GELAC Contribution

Candidate Name  
John McCain

011  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☒ President

Disbursement For: 2008  
☐ Primary ☐ General  
☒ Other (specify) ▼

State: District: Other 2008

Transaction ID: 28755899

Date of Disbursement

08 / 19 / 2008

Amount of Each Disbursement this Period

5000.00

GELAC Contribution

**SUBTOTAL** of Disbursements This Page (optional) .....

11000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 12 / 14

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

The New Republican Majority Fund

<b>A.</b> Full Name (Last, First, Middle Initial) Committee To Elect David Cappiello For Congress	<b>Transaction ID:</b> 28756506 <b>Date of Disbursement</b>																				
Mailing Address PO Box 3198	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		1	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		1	1		2	0	0	8												
City Danbury State CT Zip Code 06813	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement 2008 General	<table border="1"> <tr> <td>500.00</td> </tr> </table>	500.00																			
500.00																					
Candidate Name Mr. David Cappiello	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 05	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 2008 General																				
<b>B.</b> Full Name (Last, First, Middle Initial) Campaign To Elect John Mccay	<b>Transaction ID:</b> 28756566 <b>Date of Disbursement</b>																				
Mailing Address PO Box 7696	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		1	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		1	1		2	0	0	8												
City Gulfport State MS Zip Code 39506	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement 2008 General	<table border="1"> <tr> <td>1000.00</td> </tr> </table>	1000.00																			
1000.00																					
Candidate Name Mr. John McCay	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MS District: 04	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 2008 General																				
<b>C.</b> Full Name (Last, First, Middle Initial) Johanns For Senate Incorporated	<b>Transaction ID:</b> 28758784 <b>Date of Disbursement</b>																				
Mailing Address 1201 O Street Suite 101	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>2</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		2	2		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		2	2		2	0	0	8												
City Lincoln State NE Zip Code 68506	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement 2008 General	<table border="1"> <tr> <td>5000.00</td> </tr> </table>	5000.00																			
5000.00																					
Candidate Name Mr. Michael Johanns	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NE District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 2008 General																				

**SUBTOTAL** of Disbursements This Page (optional) .....

6500.00

**TOTAL** This Period (last page this line number only) .....

17500.00

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 13 / 14

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

The New Republican Majority Fund

**A.** Full Name (Last, First, Middle Initial)  
Williams for Lafayette Election Commissioner

Mailing Address 408 Thomas Street

City Oxford State MS Zip Code 38655

Purpose of Disbursement  
Ney Williams, MUNICIPAL AND COUNTY MS

Candidate Name  
Ney Williams

011  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 28756387

Date of Disbursement

09 / 11 / 2008

Amount of Each Disbursement this Period

500.00

Ney Williams, MUNICIPAL  
AND COUNTY MS

**B.** Full Name (Last, First, Middle Initial)  
Jim Smith for Supreme Court Judge

Mailing Address 161 Pole Bridge Road

City Brandon State MS Zip Code 39042

Purpose of Disbursement  
Jim Smith, SUPREME COURT JUDGE MS

Candidate Name  
Jim Smith

011  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 28756613

Date of Disbursement

09 / 11 / 2008

Amount of Each Disbursement this Period

2500.00

Jim Smith, SUPREME COURT  
JUDGE MS

**SUBTOTAL** of Disbursements This Page (optional) .....

3000.00

**TOTAL** This Period (last page this line number only) .....

3000.00

Image# 28933498975

Form/Schedule: **F3XN**

Transaction ID:

Please note that all of the operating expenditures detailed in this report were made on behalf of this committee and not for any candidate or other individual.

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